U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 6500	2. Fiscal Year Covered From:			
	1 / 1 / 2004 Through: 12 / 31 / 2004			
3. Name and address of person filing.	Name, file number, and address of labor organization.			
Name Roger A Heiser	Name USW (formerly PACE)			
	Labor Organization File Number 000-318			
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any			
Street 7728 NE Hazel Dell Ave.	Street 3340 Perimeter Hill Dr.			
City Vancouver	City Nashville			
State Washington ZIP Code + 4 98665	State Tennessee ZIP Code + 4 98665			
5. Position in labor organization.				
A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizate	lusions set forth in the instructions): r derived income or other economic benefit of tion represents or is actively seeking to represent.			
monetary value from an employer whose employees your organizat	tion represents or is actively seeking to represent.			
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.			
Name Tesoro	4/8/2004 Labor management meeting			
Trade Name, if any: Tesoro Hawaii-Kapolei Refinery				
P.O. Box, Bldg., Room No., if any				
	7.b. Amount.			
Street 300 Concord Plaza				
City San Antonio	\$75			
State Texas ZIP Code + 4 78216 - 6999				
Sig	nature			
15. Signature and verification. The undersigned declares, under penalty or submitted in this report (including the information contained in any accompanundersigned's knowledge and belief, true, correct, and complete. (See the second complete)	lying documents), has been examined by the signatory and is, to the best of the			
Signed Signed Heiser	On 8/12/05 360 696-9859 Date Telephone Number			
Form LM-30 (2003)				

Name of Person Filing Roger Heiser	File Number U-				
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.					
Name and address of Business (including trade name, if any).	9. Business deals with:				
Name Alliance Bernstein Investment Research&Mgmt Trade Name, if any:	a. Labor Organization X b. Trust				
P.O. Box, Bldg., Room No., if any Street 8208 Young Ct.	c. Employer				
City Plano State Texas ZIP Code + 4 75025-4321					
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.				
Name PACE Industry Union-Management Pension Fund	Money Manager	«Ээ) этогоон арушин өөгүүн он оргон аруулган а			
Trade Name, if any: PIUMPF					
P.O. Box, Bldg., Room No., if any					
Street 3340 Perimeter Hill Dr.	11.b. Approximate dollar value of such dealing.	minimum promised and promised and residue to the state of			
City Nashville	12.a. Nature of interest held or income received.	Residence de commence de la companya del companya de la companya del companya de la companya del la companya de la companya del la companya de la companya de la companya del la companya de la companya de la companya del la companya d			
State Tennessee ZIP Code + 4 37211	6/21/2004 Benefit Fund Trustee di	nner meeting			
	12.b. Amount.	\$170			
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.				
Name n/a		1.			
Trade Name, if any:					
P.O. Box, Bldg., Room No., if any					
Street					
City					
State ZIP Code + 4					
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.				

Name of Person Filing Roger Heiser	File Number U-
Part A Continuation Page	

Part A Contin	uation Page
A. Held an interest in, engaged in transactions (including loans) with, or derived in employees your organization represents or is actively seeking to represent.	ncome or other economic benefit of monetary value from an employer whose
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name SCA Tissue of North America	10/21/2004 Labor management meeting
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any P.O. Box 2400	
Street	7.b. Amount.
City Neenah	\$40
on Nectical	Accessed the completed at the set of the set
State Wisconsin ZIP Code + 4 54957-2400	
A. Held an interest in, engaged in transactions (including loans) with, or derived	income or other economic benefit of monetary value from an employer whose
employees your organization represents or is actively seeking to represent.	7 a Nature of Internet Transaction as because
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any	
Street	7.b. Amount.
Street	Processing to the control of the con
City	
State ZIP Code + 4	
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street	f*************************************
City	The state of the s
State ZIP Code + 4	

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Add New Part A

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Name of Person Filing Roger	Heiser	File Number U-

8. Name and address of Business (in	cluding trade name, if any).	9. Business deals with:	
Name ICC Capital Manageme	ent, Inc.	a. Labor Organization	
Trade Name, if any:		\$ f	
P.O. Box, Bldg., Room No., if any		b. Trust	
Street 390 N. Orange Ave.		c. Employer	
City Orlando			
State Florida	ZIP Code + 4 32801-1643	·	
10. If 9.b. or 9.c. is checked give trust or	employer's name.	11.a. Nature of such dealing.	
Name PACE Industry Union-	Management Pension Fund	Money Manager	
Trade Name, if any: PIUMPF			
P.O. Box, Bldg., Room No., if any			
Street 3340 Perimeter Hill	Dr.		
City Nashville	and a management of the final of the contract		
State Tennessee	ZIP Code + 4 37211	11.b. Approximate dollar value of such dealing.	
		12.a. Nature of interest held or income received.	
		6/23/2004 Benefit Fund Trustee mee	ting dinner.
		12.b. Amount.	\$244

Name of Person Filing Roger Heiser		File Number U-	

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name MassMutual Financial Group	a. Labor Organization	
Trade Name, if any:	£	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 1295 State St.	c. Employer	
City Springfield		
State Massachusetts ZIP Code + 4 01111-0001		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	recommende a commenda a visca a commenda a company
Name PACE Industry Union-Managment Fund	Money Manager	
Trade Name, if any: PIUMPF		
P.O. Box, Bldg., Room No., if any		
Street 3340 Perimeter Hill Dr.		
City _{Mashville}		
State Tennessee ZIP Code + 4 37211	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	getting (get 1 des) and the first first first first first first for the first for the first firs
	6/24/2004 Benefit Fund Trustee mee	ting dinner
	12.b. Amount.	\$280

Name of Person Filing Roger Heiser	File Number U-

8. Name and address of Business	(including trade name	if any)	9. Business deals with:	***************************************
Name Thompson, Siegel &				
Trade Name, if any:			a. Labor Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box 6883		b. Trust	
Street 5000 Monument Aven	ue		c. Employer	
City Richmond		The American Control of the Control		
State Virginia	ZIP Code + 4	23230-3600		
10. If 9.b. or 9.c. is checked give trust	or employer's name.	THE STATE OF THE S	11.a. Nature of such dealing.	
Name PACE Industry Unio	n-Management Fu	nd	Money Manager	,
Trade Name, if any: PIUMPF				
P.O. Box, Bldg., Room No., if any				
Street 3340 Perimeter Hill	l Dr.	en e	The state of the s	
City Nashville				
State Tennessee	ZIP Code + 4	37211	11.b. Approximate dollar value of such dealing.	
			12.a. Nature of interest held or income received.	
			11/15/2004 Benefit Fund Trustee me	eting dinner.
			12.b. Amount.	\$90

Name of Person Filing Roger Heiser	File Number U-

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Security Asset Capital Corporation Trade Name, if any: P.O. Box, Bldg., Room No., if any P.O. Box 9098 Street 16236 San Diequito Rd. City Rancho Santa Re	a. Labor Organization b. Trust c. Employer	
City Rancho Santa Fe State California ZIP Code + 4 92067-4098		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name PACE Industry Union-Management Fund Trade Name, if any: PIUMPF P.O. Box, Bldg., Room No., if any Street 3340 Perimeter Hill Dr. City Nashville	Money Manager	
State Tennessee ZIP Code + 4 37211	11.b. Approximate dollar value of such dealing.	Comment of the Commen
	12.a. Nature of interest held or income received.	
	11/15/2004 Benefit Fund Trustee med	eting dinner.
	12.b. Amount.	\$90

Name of Person Filing Roger Heiser	File Number U-

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Weaver Barksdale and Associates Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 30 Burton Hills Blvd. City Nashville State Tennessee ZIP Code + 4 37215-6140	a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name PACE Benefits Fund Trade Name, if any:	Money Manager	Obtohologica and America and A
P.O. Box, Bldg., Room No., if any Street 3340 Perimeter Hill Dr. City Nashville		
State Tennessee ZIP Code + 4 37215-6140		
Jacob Leimessee 21 Code 14 37215-6140	11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received.	
	6/30/2004 Benefit Fund Trustee mee	ting dinner.
	12.b. Amount.	\$120

Name of Person Filing Roger Heiser	File Number U-

8. Name and address of Business (inclu	ding trade name, if any).	9. Business deals with:	
Name Bank of America Corp.		a. Labor Organization	
Trade Name, if any:		a. Labor Organization	
P.O. Box, Bidg., Room No., if any Bank	of America Corp Cntr	b. Trust	
Street 100 N. Tryon St.	andre en	c. Employer	
City Charlotte			
State North Carolina	ZIP Code + 4 28255-0001		
10. If 9.b. or 9.c. is checked give trust or en	nployer's name.	11.a. Nature of such dealing.	
Name PACE Industry Union-Ma	ınagement Fund	Money Manager	
Trade Name, if any: PIUMPF			
P.O. Box, Bldg., Room No., if any			
Street 3340 Perimeter Hill Dr	Market 11-7-14 Associated As Associated Association 11-7 Additional Association (Association) (Associated Association) (Associated Associated Association) (Associated Association) (Associated Association) (Associated Association) (Associated Associated Associate		
City Nashville			
State Tennessee	ZIP Code + 4 37211	11.b. Approximate dollar value of such dealing.	
		12.a. Nature of interest held or income received.	nick in Addition and On the workship and a supplied a supplied and
		11/16/2004 Benefit Fund Trustee me	eting dinner.
			AAA
			S
		12.b. Amount.	\$100

Name of Person Filing Roger Heiser File Number U-		 	
l	Name of Person Filing Roger Heiser		File Number U-

8. Name and address of Business (in	cluding trade name, if	fany).	9. Business deals with:	
Name MassMutual Financial	. Group		a Labor Organization	
Trade Name, if any: MML Investo	ors Services, In	ıc.	a. Labor Organization	
P.O. Box, Bldg., Room No., if any		The Control of the Co	b. Trust	
Street 1295 State St.			c. Employer	
City Springfield				
State Massachusetts	ZIP Code + 4 01	1111-0001		
10. If 9.b. or 9.c. is checked give trust or	employer's name.		11.a. Nature of such dealing.	
Name PACE Idunstry Union-	Name PACE Idunstry Union-Management Fund		Money Manager	
Trade Name, if any: PIUMPF	т тәді ұйы Дүрін Қарақ Қашақтайда қазашын тұйттінді. Кіті үзі үйті ұқақ қатар қақ қат қазақ қарақ тақ қа	er e		
P.O. Box, Bldg., Room No., if any				not be the second
Street 3340 Perimieter Hill				
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City Nashville	ause de de articleur de des autories de la company de la c	The state of the s	The state of the s	
State Tennessee	ZIP Code + 4 37	7211	11.b. Approximate dollar value of such dealing.	
			12.a. Nature of interest held or income received.	
			11/16/2004 Benefit Fund Trustee me	eting dinner
			12.b. Amount.	\$100